## Employment Opportunities Miami-Dade County, Florida



Center For Employment Application 140 West Flagler Street, Suite 105 Miami, FL 33130

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Office Hours 8:30 am - 4:00 pm Monday - Friday Job Hotline (305) 375-1871

## Resume Submittal Form - (For "Must Submit Resume Positions" Only)

Resume Submittal Instructions: Your resume will be scanned by a computerized resume processing system. Effective June 19, 2000, only one (1) copy of your resume is needed regardless of the number of Resume positions for which you are applying. This form may be used to apply for multiple positions. Please indicate the Requisition number(s) and title(s) for which you are applying. Your resume will be linked to the requisition number(s) and title(s) you identify below. Please refer to the new resume application instructions for information on how to prepare a "scannable" resume.

Have you submitted a resume **after June 18, 2000?** Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, you **need not** resubmit your resume, **unless** you are updating your current resume on file. If not, a copy of your resume must be attached to this form in order to be considered for the any of the following position(s).

Requisition Number(s) and	Title(s) For Which Yo	u Are Applying:			
1. Requisition #	Title:			· · · · · · · · · · · · · · · · · · ·	
2. Requisition #	Title:			<del></del>	
3. Requisition #	Title:	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
4. Requisition #	Title:				
5. Requisition #	Title:				
Social Security Number		(Required)			
Last Name	First N	First Name		Middle Initial	
Street Number And Street A	ddress		Building #	Apartment #	
City	State	)		Zip Code	
() Home Phone Number		() Daytime Pho	() Daytime Phone Number		
Applicant's Signature _		Date			
	FOR OFFI	CE USE ONLY			
Form Processed By:			Date:		

"We're more than County employees, We're your Neighbors"